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## BIB DATA SHEET

CONFIRMATION NO. 5030

| SERIAL NUMBER   | FILING or 371(c)<br>DATE  | CLASS   | GROUP ART UNIT  | ATTORNEY DOCKET<br>NO.       |                           |                                |
|---|---|---|---|------------------------------|---------------------------|--------------------------------|
| 10/782,149  | 02/19/2004<br>RULE  | 623   | 3736  | P01568-US-01<br>(26259.0010) |                           |                                |
| <b>APPLICANTS</b><br>Ghassan S. Kassab, Newport Coast, CA;<br>Hans Gregersen, Hornslet, DENMARK;<br>Mohamed Reza Movahed, Irvine, CA;   |   |   |   |                              |                           |                                |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/449,266 02/21/2003<br>and claims benefit of 60/493,145 08/07/2003<br>and claims benefit of 60/502,139 09/11/2003   |   |   |   |                              |                           |                                |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |   |   |                              |                           |                                |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>05/12/2004   |   |   |   |                              |                           |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and Acknowledged <u>/BRIAN SZMAL/</u><br><small>Examiner's Signature</small> |   | <input type="checkbox"/> Met after Allowance<br><small>Initials</small> | <b>STATE OR COUNTRY</b><br>CA   | <b>SHEETS DRAWINGS</b><br>8  | <b>TOTAL CLAIMS</b><br>49 | <b>INDEPENDENT CLAIMS</b><br>7 |
| <b>ADDRESS</b><br>ICE MILLER LLP<br>ONE AMERICAN SQUARE, SUITE 3100<br>INDIANAPOLIS, IN 46282-0200<br>UNITED STATES   |   |   |   |                              |                           |                                |
| <b>TITLE</b><br>SYSTEM AND METHOD FOR MEASURING CROSS-SECTIONAL AREAS AND PRESSURE GRADIENTS IN LUMINAL ORGANS  |   |   |   |                              |                           |                                |
| <b>FILING FEE RECEIVED</b><br>1350  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                              |                           |                                |